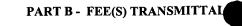


Complete and send this form, together with applicable fee(s), to: Mail



Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

or <u>Fax</u>

Alexandria, Virginia 22313-1450 (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

7590 09/27/2004 USTOMER NUMBER

FILING DATE

12/31/2001

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)					
(Signature)					
(Date)					
CONFIRMATION NO.	ATTORNEY DOCKET NO.	FIRST NAMED INVENTOR			

217671US3

5638

TITLE OF INVENTION: POWER TRANSMISSION SYSTEM

APPLICATION NO.

10/032 067

	I			NUMBER OF TRANSPORTED			D.V.D. T	D. M. D. L.
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOT	AL FEE(S)		DATE DUE
nonprovisional	NO	\$ 1330	\$1370	\$300		\$ 1630	\$1670	12/27/2004
EXAM	EXAMINER		Т	CLASS-SUBCLASS				
WRIGH	IT, DIRK	3681		475-005000	_			
CFR_1.363).	ce address or indication of "F	`	2. For printing on the patent front page, l (1) the names of up to 3 registered pate			vs 1_	OBLON,	, SPIVAK,
Change of correspondaddress form PTO/SB/1	spondence address (or Change of Correspondence SB/122) attached.			or agents OR, alternatively, (2) the name of a single firm (having as a			McCLEL	LAND, MAIER
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	tion (or "Fee Address" Indic or more recent) attached. Us	ation form e of a Customer	registered attorney or agent) and the names of up to					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON T	HE PATENT	Γ (print or type)				
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified by n 37 CFR 3.11. Completion	elow, no assignee d of this form is NOT	ata will app a substitute	ear on the patent. If an assignment.	gnee is ide	ntified be	low, the de	ocument has been filed for
(A) NAME OF ASSIGN	IEE	(B)	RESIDENC	CE: (CITY and STATE OR CO	DUNTRY)		TENE VVV	000213 10032067
TOYOTA JIDOS	HA KABUSHIKI KA	ISHA	Toy		01 FC:15 02 FC:15			1370.00 OP 300.00 OP
				patent): 🗖 Individual 🖾	Corporation	or other	private gro	oup entity Government
4a. The following fee(s) are	enclosed:		Payment of	* *				
Issue Fee				in the amount of the fee(s) is o				
_	small entity discount permitt			by credit card. Form PTO-203				
Advance Order - # o	f Copies		The Dire Deposit Acc	ector is hereby authorized by ount Number15-003	charge the	required enclose)	fee(s), or an extra co	credit any overpayment, to opy of this form).
5. Change in Entity Status	(from status indicated above	e)						
	MALL ENTITY status. See			cant is no longer claiming SM.				
The Director of the USPTO NOTE: The Issue Fee and Finterest as shown by the rec	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	ue Fee and Publicati will not be accepted ent and Trademark (on Fee (if ar from anyon Office.	ny) or to re-apply any previou e other than the applicant; a re	sly paid iss gistered att	ue fee to orney or	the applica agent; or th	tion identified above. le assignee or other party in
Authorized Signature	replacafetta	Jr.			100.29	2009	i	
Typed or printed name	Joseph Scafetta,	Úr.		Registratio	on No	≺eg. ſ	lo. 26,	803

Hiroshi Hata

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.